

FEC  
FORM 3REPORT OF RECEIPTS  
AND DISBURSEMENTS  
For An Authorized Committee

RECEIVED

2014 FEB -5 AM 11:47

Office Use Only MAIL CENTER

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.

12FE4M5

Citizens for Mike Assad, Inc.

ADDRESS (number and street)

106 Minnetonka Ave

Check if different  
than previously  
reported. (ACC)

Absecon

NJ

08201

2. FEC IDENTIFICATION NUMBER ▼

C00546416

3. IS THIS
- 
- REPORT

☒ NEW  
(N) OR☐ AMENDED  
(A)CITY ▲ STATE ▲ ZIP CODE ▲  
STATE ▼ DISTRICT

NJ

02

4. TYPE OF REPORT (Choose One)

- (a) Quarterly Reports:

April 15 Quarterly Report (Q1)

July 15 Quarterly Report (Q2)

October 15 Quarterly Report (Q3)

☒ January 31 Year-End Report (YE)

Termination Report (TER)

- (b) 12-Day PRE-Election Report for the:

☐

Primary (12P)

☐

General (12G)

☐

Runoff (12R)

☐

Convention (12C)

☐

Special (12S)

Election on

M M / D D / Y Y Y Y

in the  
State of

- (c) 30-Day POST-Election Report for the:

☐

General (30G)

☐

Runoff (30R)

☐

Special (30S)

Election on

M M / D D / Y Y Y Y

in the  
State of

5. Covering Period

M M / D D / Y Y Y Y  
10 / 01 / 2013

through

M M / D D / Y Y Y Y  
12 / 31 / 2013

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer

Dorothy L. Assad

Signature of Treasurer

Dorothy L. Assad

Date

M M / D D / Y Y Y Y  
1 / 31 / 2014

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

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(Revised 02/2003)